

## STATE OF NEW HAMPSHIRE

# 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s)	oi Grimbil	as	
II. Name of lobbyist's partnership,	firm or corporation, if an	y:	
J Grimbilas (Name of partnership	Strategic Si	lutions	
Po Box 2 33 Business Address: (Street)	Northwood	d NH	0326   (Zip Code)
Business Address: (Street)	(Town/City)		(Zip Code)
(603) 496-2638 (Telephone)	( )(Fax)	e-mail Jodi	@ JGStrategies.com
III. This statement covers: (Choose reportable expense transactions wh			may file a separate report for
All reportable transactions occurr			
	Indeck Eher	gy Services I  by Stration Form)	hc
(Full Name of OR	Client as it appears on the Lob	obyist Registration Form)	
All reportable transactions by the unrelated to any particular client.	obbyist (including the lobb	yist's family), or the lobbyi	ng firm listed below which are
IV. Date of Report April 26, 20 Reports cover: activity from date of t	17 Pregistration to 3/31/17	July 26, 2017 activity from 4/1/17 to 6/30/1	17
October 25, activity from 7/1		January 31, 2018 activity from 10/1/17 to 12/3	
V. There have been no fees receiff this box is checked, complete just the Concord, NH 03301.			
VI. Check if additional reports are	attached:		
If you have received fees or made	expenditures, you must fil	e Addendum A—Fees and I	Expenses
☐ If you have paid an honorarium o Expense Reimbursement	r reimbursed expenses, you	must file <b>Addendum B</b> – R	eport of Honorariums or
If you, your firm, or your family l	nas made political contribut	tions, you must file Addend	um C-Political Contributions
Sworn Statement/Affirmation by Lot have read RSA 15, RSA 15-B, RSA and complete to the best of my knowledge.	14-C and RSA 664 and her	eby swear or affirm that the	foregoing information is true
Jodi Gumbles		4/26/17	
(Signature of lobbyist)  Tool (orimbile)		(Da	RECEIVED
(Print Name of lobbyist)			100 0 0 0017

APR 2 6 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

# P L E A S E P R I N T

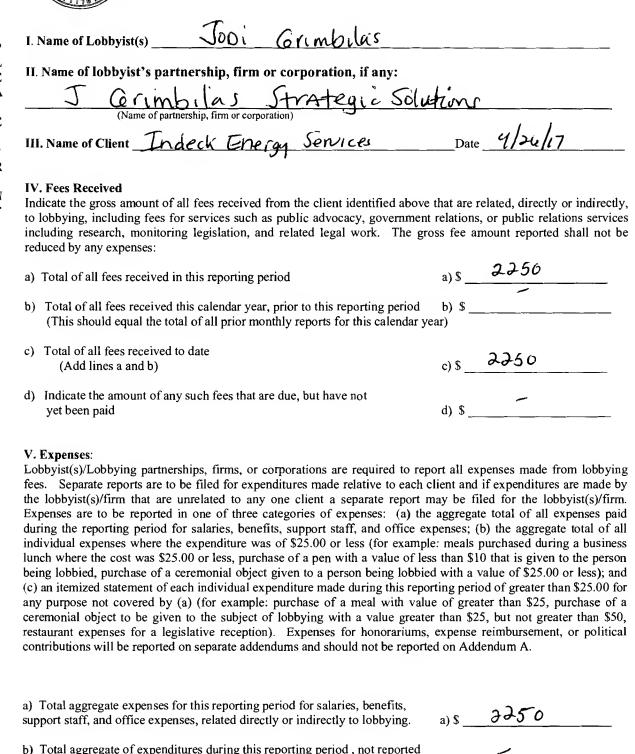
in a), of \$25 or less.

c) Total of all itemized expenditures reported in detail in section VI.

## STATE OF NEW HAMPSHIRE

## Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)



d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 225 0
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$ <b>225</b> 0·
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
is true and complete to the best of my knowledge and benef.	
Osi Humbler	4/26/07
(Signature of lobbyist)  Tooi Grimbilus  (Print Name of lobbyist)	(Date)
Joni Grimbilus	
(Print Name of lobbyist)	